



TRANSMITTAL FORM

*(To be used for all correspondence
after initial filing)*

TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>	Application Number	10/790,622
	Filing Date	March 1, 2004
	First Named Inventor	Ragina Naidu
	Art Unit	1625
	Examiner Name	Ba K. Trinh
	Attorney Docket No.	740082.408C1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input checked="" type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): <hr/> <hr/> <hr/> <hr/>
<u>Remarks</u>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number 00500
Signature		
Printed Name	Hai Han, Ph.D.	
Date	February 2, 2005	Reg. No. 54,150

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Jason Añover	Date: February 2, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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 Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known				
FEE TRANSMITTAL for FY 2005		Application Number		10/790,622		
		Filing Date		March 1, 2004		
		First Named Inventor		Ragina Naidu		
		Examiner Name		Ba K. Trinh		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit		1625		
TOTAL AMOUNT OF PAYMENT		(\$180.00)		Attorney Docket No.		
METHOD OF PAYMENT (check all that apply)						
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other (please identify): _____						
<input type="checkbox"/> Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
<input type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input type="checkbox"/> Charge any additional fee(s) or underpayments			<input checked="" type="checkbox"/> Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17			
Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity		Small Entity		Small Entity	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Provisional	200	100	0	0	0	0
2. EXCESS CLAIM FEES						
<u>Fee Description</u>						<u>Small Entity</u>
						<u>Fee (\$)</u>
						<u>Fee (\$)</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						
50 25						
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						
200 100						
Multiple dependent claims						
360 180						
<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Multiple Dependent Claims</u>
						<u>Fee (\$)</u>
						<u>Fee Paid (\$)</u>
$-20 \text{ or HP} =$ _____		\times _____		$=$ _____		$\text{Fee ($)}$ _____
$-3 \text{ or HP} =$ _____		\times _____		$=$ _____		$\text{Fee ($)}$ _____
HP = highest number of total claims paid for, if greater than 20						
<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 3						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
<u>Total Sheets</u>		<u>Extra Sheets</u>		<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>
						<u>Fee Paid (\$)</u>
$-100 =$ _____		$/50 =$ _____		$(\text{round up to a whole number})$		\times _____
HP = highest number of total claims paid for, if greater than 20						
4. OTHER FEE(S)						
Non-English Specification, \$130 fee (no small entity discount)						
_____ <u>Other:</u> <u>Submission of Information Disclosure Statement</u> <u>180</u>						
SUBMITTED BY						
Signature				Registration No. (Attorney/Agent)	54,150	Telephone
Name (Print/Type)		Hai Han, Ph.D.		Date	206-622-4900	



PATENT

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

February 2, 2005

Jason Añover

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Ragina Naidu
Application No. : 10/790,622
Filed : March 1, 2004
For : SEMI-SYNTHESIS OF TAXANE INTERMEDIATES AND AZIRIDINE ANALOGUES AND THEIR CONVERSION TO PACLITAXEL AND DOCETAXEL

Examiner : Ba K. Trinh
Art Unit : 1625
Docket No. : 740082.408C1
Date : February 2, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents:

In accordance with 37 CFR 1.56 and 1.97 through 1.98, applicant wishes to make known to the U.S. Patent and Trademark Office the references set forth on the attached Form PTO-1449. Copies of the cited U.S. patents and published patent applications are not required and accordingly have not been provided. Copies of all other cited references are enclosed. As to any reference cited, applicant does not admit that it is "prior art" under 35 U.S.C. §§ 102 or 103,

and specifically reserves the right to traverse or antedate any such reference, as by a showing under 37 CFR 1.131 or other method. Although the aforesaid references are made known to the Patent and Trademark Office in compliance with applicant's duty to disclose all information she is aware of which is believed relevant to the examination of the above-identified application, applicant believes that her invention is patentable.

Please acknowledge receipt of this Information Disclosure Statement and kindly make the cited references of record in the above-identified application.

A fee of \$180 is submitted in accordance with 37 CFR 1.97(c). The Director is authorized to charge any other fees which may be required, or credit any overpayment to Deposit Account No. 19-1090.

Respectfully submitted,
Seed Intellectual Property Law Group PLLC



Hai Han, Ph.D.

Registration No. 54,150

Enclosures:

- Postcard
- Check
- Form PTO-1449
- Cited References (3)

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Seattle, Washington 98104-7092
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FORM PTO-1449 (REV.7-80)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTY. DOCKET NO. 740082.408C1	APPLICATION NO. 10/790,622
FEB 14 2005 INFORMATION DISCLOSURE STATEMENT (Use several sheets if necessary)		APPLICANT Ragina Naidu			
		FILING DATE March 1, 2004		GROUP ART UNIT 1625	

U.S. PATENT DOCUMENTS

*EXAMINER INITIAL	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
AA	4,814,470	03/21/89	Colin et al.	514	449	
AB	4,924,011	05/08/90	Denis et al.	549	510	
AC	4,924,012	05/08/90	Colin et al.	549	510	
AD	5,175,315	12/29/92	Holton	549	510	
AE	5,808,113	09/15/98	Murray et al.	549	510	
AF	10/695,416		Naidu			10/27/03
AG	10/877,789		Naidu			06/25/04
AH	10/881,711		Fan et al.			06/29/04
AI						
AJ						

FOREIGN PATENT DOCUMENTS

	DOCUMENT NUMBER	DATE	COUNTRY	TRANSLATION	
				YES	NO
AK					
AL					
AM					
AN					
AO					

OTHER PRIOR ART (Including Author, Title, Date, Pertinent Pages, Etc.)

AP		
AQ		
AR		

EXAMINER	DATE CONSIDERED
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* EXAMINER: Initial if reference considered, whether or not criteria is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant(s).